

STATE OF WISCONSIN Division of Hearings and Appeals

In the Matter of

DECISION

MPA/162778

PRELIMINARY RECITALS

Pursuant to a petition filed December 18, 2014, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a hearing was held on March 03, 2015, at Elkhorn, Wisconsin.

The issue for determination is whether the agency properly denied reimbursement to the provider for a PT evaluation.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services 1 West Wilson Street, Room 651 Madison, Wisconsin 53703

By: Pamela Hoffman

Division of Health Care Access and Accountability 1 West Wilson Street, Room 272 P.O. Box 309 Madison, WI 53707-0309

ADMINISTRATIVE LAW JUDGE:

Debra Bursinger Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner is a resident of Walworth County.
- 2. On August 26, 2014, the Petitioner's provider, Fort Healthcare, performed a PT evaluation.

- 3. On September 18, 2014, the provider submitted a prior authorization request on behalf of the Petitioner for the PT evaluation and PT services. The request was re-submitted with corrections on October 21 and November 12, 2014.
- 4. On November 12, 2014, the agency issued a notice informing the Petitioner that it had approved the requested PT services but denied reimbursement of the PT evaluation due to the provider's untimely submission of the PA request.
- 5. On December 18, 2014, the Petitioner submitted a timely appeal to the Division of Hearings and Appeals.

DISCUSSION

Physical therapy is covered by MA under Wis. Adm. Code, §DHS 107.16. Generally it is covered without need for prior authorization (PA) for 35 treatment days, per spell of illness. Wis. Adm. Code, §DHS 107.16(2)(b). After that, PA for additional treatment is necessary.

Therapy providers are allowed 14 calendar days to submit a PA request for reimbursement of a therapy evaluation following completion of the initial evaluation. MA Provider Handbook, see online at https://www.forwardhealth.wi.gov/WIPortal/Online%20Handbooks/Display/tabid/152/Default.aspx?ia=1 &p=1&sa=87&s=2&c=61&nt=Information Regarding Evaluations&adv=Y

In this case, the therapy evaluation took place on August 26, 2014. The first request for reimbursement of the evaluation was submitted on September 18, 2014. This was 23 days after the evaluation. Thus, the agency properly denied the request for reimbursement.

The regulations provide that the Petitioner may not be held liable by the provider for the cost of the evaluation in this case.

"When a service must be authorized by the department in order to be covered, the recipient may not be held liable by the certified provider unless the prior authorization was denied by the department and the recipient was informed of the recipient's personal liability before provision of the service. In that case the recipient may request a fair hearing. Negligence on the part of the provider in the prior authorization process shall not result in recipient liability."

Wis. Admin. Code § DHS 104.01(12).

In this case, the PT evaluation was not denied by the department until after it had already been performed and after the allowable date for submission for reimbursement by the provider. Because the denial was the untimely submission of the request by the provider, the Petitioner may not be held liable for the cost of the evaluation.

Note to the Petitioner: a copy of this decision is not being sent to the provider, Fort Healthcare. You may send a copy to the provider.

CONCLUSIONS OF LAW

The agency properly denied the provider's request for reimbursement of a PT evaluation.

THEREFORE, it is

ORDERED

That the Petitioner's appeal is dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received** within 20 days after the date of this decision. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Milwaukee, Wisconsin, this 31st day of March, 2015

\sDebra Bursinger
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on March 31, 2015.

Division of Health Care Access and Accountability